



UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

UNITED STATES OF AMERICA, et seq.
Plaintiff (Petitioner)

CASE and/or DOCKET No.: 18-03580

Sheriff's Sale Date: _____

V.

JILL N. SCHRECK A/K/A JILL NADINE SCHRECK, ET AL.
Defendant (Respondent)

AFFIDAVIT OF SERVICE

TYPE OF PROCESS: ORDER, SUMMONS AND COMPLAINT

I, DENISE HINKLE, certify that I am eighteen years of age or older and that I am not a party to the action nor an employee nor relative of a party, and that I served JILL N. SCHRECK A/K/A JILL NADINE SCHRECK the above process on the 14 day of December, 2018, at 10:30 o'clock, P.M., at 215 WEST PEN ARGYL STREET PEN ARGYL, PA 18067, County of Northampton, Commonwealth of Pennsylvania:

Manner of Service:

☒ By posting a copy of the original process on the most public part of the property pursuant to an order of court

Service was attempted on the following dates/times:

1) _____ 2) _____ 3) _____

Commonwealth/State of PA) ss.
County of Berks)

Before me, the undersigned notary public, this day, personally, appeared Denise Hinkle to me known, who being duly sworn according to law, deposes the following:

I hereby swear or affirm that the facts set forth in the foregoing Affidavit of Service are true and correct.

Denise Hinkle
(Signature of Affiant)

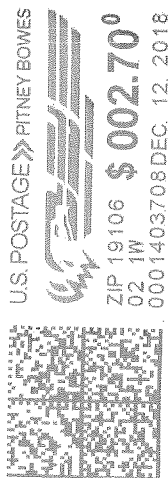
File Number: USA-184703
Case ID #: 5381646

Subscribed and sworn to before me
this 18 day of Dec, 2018.

Notary Public

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Eric M. Afflerbach, Notary Public
Washington Twp. Berks County
My commission expires November 18, 2021

Name and Address of Sender KML LAW GROUP, P.C. SUITE 5000 701 MARKET STREET PHILADELPHIA, PA 19106-1532		Check type of mail or service; <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Delivery Confirmation <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured		Recorded Delivery (International) <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation		Affix Stamp Here (If issued as a certificate of mailing, or for additional copies of this bill) Postmark and Date of Receipt		Handling Charge		Actual Value if Registered		Insured Value		Due Sender if COD		DC Fee		SC Fee		SH Fee		RD Fee		RR Fee	
Article Number		Addressee (Name, Street, City, State, & ZIP Code)		Postage		Fee		Postmark and Date of Receipt		Actual Value if Registered		Insured Value		Due Sender if COD		DC Fee		SC Fee		SH Fee		RD Fee		RR Fee	
1.	SCHRECK, JILL N. 215 West Pen Argyl Street Pen Argyl, PA 18072																								
2.	SCHRECK, JILL N. 215 Pen Argyl Street Pen Argyl, PA 18072																								
3.																									
4.																									
5.																									
6.																									
7.																									
8.																									



See Privacy Act Statement on Reverse

Complete by Typewriter, Ink, or Ball Point Pen

PS Form 3877, February 2002 (Page 1 of 2)

USA-184703 Northampton County Sale Date:

JILL N. SCHRECK a/k/a JILL NADINE SCHRECK

Kim Bramble

KIMB-USA

USPS Manifest Mailing System

Page 1

Mailer's Name & Address KML Law Group 701 Market Street Suite 5000 Philadelphia, PA 19106	Permit Number 123	MAC Ver. Number ConnectShip Prologistics 6.5
	Sequence Number 8188-1	Class of Mail Mixed

Article #/ Piece ID	Addressee Name Delivery Address	ES Type	Postage	ES Fee	Insurance Amount	Due/ Sender	Total Charge
9171999991703968027309	SCHRECK, JILL N.		0.485				5.34
9171999991703968027309	215 West Pen Argyl Street	ERR		1.40			
	Pen Argyl, PA 18072	C		3.45			
9171999991703968027316	SCHRECK, JILL N.		0.485				5.34
9171999991703968027316	215 Pen Argyl Street	ERR		1.40			
	Pen Argyl, PA 18072	C		3.45			
<hr/>							
Page Totals	2		0.97	9.70			10.67
Cumulative Totals	2		0.97	9.70			10.67

USPS CERTIFICATION

Total Number Of Pieces Received _____

Signature of Receiving Employee _____

Round Stamp _____

PS Form 3877 (Facsimile)

Extra Service Codes:

C Certified
ERR Return Receipt

